PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

087513

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN SMALL ENTITY | |
|--|--|-----------------------------------|------------------|-------|------------------|-------------------------------------|------------------|------|--------------------|------------------------|------|----------------------------|------------------------|
| FOR | | 1 | NUMBER FILED | | NUMBER EXTRA | |] [| RATE | FEE | | RATE | FEE | |
| BASIC FEE | | | | | | | | | , d | 395.00 | OR | | 790.00 |
| TOTAL CLAIMS | | | 20 | minus | 20 = | * | , | 4 | x\$11= | | OR | x\$22= | 1 |
| INDEPENDENT CLAIMS | | | 3 minus 3 = | | | * ′ | | 4 | x41= | | OR | x82= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | ┚┃ | +135= | | OR | +270= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | | TOTAL | | OR | TOTAL | 1 |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAII REMAII AFTE AMEND | NING ER | | NL PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | · | RATE | ADDI- TIONAL FEE |
| | Total | .36 | 2 | Minus | ** 6 | 30 | = <i>O</i> | | x\$11= | | OR | x\$22 <u>=</u> | |
| | Independent | * 2 | 3 | Minus | *** | 3 | = 0 | | x41= | | OR | x82= | |
| 4 | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | +270= | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | A | TOTAL DDIT. FEE | | OR , | TOTAL ADDIT. FEE | PD |
| MENDMENT B | | CLAII REMAII AFTE AMENDI | MS NING ER | | HIO NU PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 7 | | Minus | * | 20 | = | | x\$11= | | OR | x\$22= | |
| | Independent | · 3 | | Minus | *** | 3 | = | | x41= | | OR | x82= | |
| AN | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | +270= | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | | · · · · | OR | TOTAL ADDIT. FEE | PL |
| AMENDMENT C | 197 | CLAII REMAII AFTE AMENDI | NING ER | | HIC NU PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · [() | | Minus | ** | 20 | =~ | | x\$11= | - | OR | x\$22= | |
| | Independent | * 4 | | Minus | *** | 3 | =] | | x41= | - | OR | x82= | 84 3 |
| ٨ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | +270= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |